## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	C C00075820
	M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report filed	
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 SLATERS LANE	Amount
City State Zip Code	376019.00
ALEXANDRIA VA 22314	Transaction ID : SE24-0.042106 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA  Category/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Sought: X House District: 01
ANN KIRKPATRICK Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought  Disbu 2014	rsement For: Primary X General  Other (specify) ▶
Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination
Mailing Address	09 08 2014
Mailing Address PO BOX 16504	Amount
City State Zip Code	22175.00
7.227.0.027.007	Transaction ID : SE24-0.042156 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA  Category/ Type	09 / 09 / 2014
Name of Federal Candidate Support Office	e Sought: X House District: 02
RONALD BARBER Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	orsement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	398194.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Keith A. Davis  [Electronically Filed] Date 0	9 10 2014
Signature	